



Appl. No. 09/699,757

15D (10.0)
Buell

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Matsushita et al.
Appl. No.: 09/699,757
Filed: October 30, 2000
Conf. No.: 6866
Title: GRAPHIC PROCESSING APPARATUS
Art Unit: 2672
Examiner: M. Good Johnson
Docket No.: 112857-076

RECEIVED

FEB 18 2004

Technology Center 2600

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT UNDER 36 C.F.R. §116


Sir:

Please amend the above-identified patent application in response to the Final Office Action issued on December 8, 2003 as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 6 of this paper.

AF

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 112857-00076	
Applicant(s):					
Serial No. 09/699,757	Filing Date October 30, 2000	Examiner Mr. Good Johnson		Group Art Unit 2672	
Invention: GRAPHIC PROCESSING APPARATUS					
<u>TO THE COMMISSIONER FOR PATENTS:</u>				FEB 1 8 2004 Technology Center 2600	
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	6 -	6 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-1818 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. </div> <div style="text-align: right;"> Dated: February 9, 2004 </div> </div> <div style="margin-top: 20px;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">  _____ Signature </div> <div style="width: 55%;"> <p>Peter Zura Reg. No. 48,196 P.O. Box 1135 Chicago, Illinois 60690-1135 (312) 807-4708</p> </div> </div> </div>					
<div style="border: 1px solid black; padding: 5px;"> <p>I certify that this document and fee is being deposited on February 9, 2004 with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> </div> <div style="margin-top: 10px; text-align: center;"> <p><i>Signature of Person Mailing Correspondence</i></p> <p>Renee Street</p> <p><i>Typed or Printed Name of Person Mailing Correspondence</i></p> </div>					
CC:					